

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**Attorney Docket No. **R013A-REG**First Inventor **BUSER, et al.**Title **The Use of NK-1 Receptor Antagonists  
Against Benign Prostatic Hyperplasia**Express Mail Label No. **ET 648001939 US**

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.  
See 37 CFR 1.27.
3. ☒ Specification Total Pages **50**
- Including:
- Title page with "Certificate of Express Mailing" (unnumbered)
  - Specification, pp 1-34
  - Claims, pp 35-48
  - Abstract, pg 49
4. ☐ Drawing(s) (35 U.S.C. 113) [Total Sheets ]
5. Oath or Declaration [Total Pages **3** ]
- a. ☒ Unsigned
- b. ☐ Copy from a prior application (37 CFR 1.63 (d))
6. ☐ Application Data Sheet. See 37 CFR 1.76

**ADDRESS TO:**Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

7. ☐ CD-ROM or CD-R in duplicate, large table or  
Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)
- a. ☐ Computer Readable Form (CRF)
- b. Specification Sequence Listing on:
- i. ☐ CD-ROM or CD-R (2 copies); or
- ii. ☐ paper
- c. ☐ Statements verifying identity of above copies

**ACCOMPANYING APPLICATIONS PARTS**

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 C.F.R. §3.73(b) Statement ☐ Power of  
(when there is an assignee) Attorney
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure ☐ Copies of IDS  
Statement (IDS)/PTO-1449 Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15. ☒ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
16. ☐ Request and Certification under 35 U.S.C. 122  
(b)(2)(B)(i). Applicant must attach form PTO/SB/35  
or its equivalent.
17. ☐ Other:

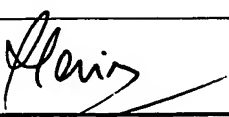
**Claim for Benefit of Provisional Application(s)**

This application claims the benefit under Title 35 U.S.C. 119(e) of European Patent Application  
No. 01109853.0, filed on April 23, 2002 (certified copy enclosed within).

**17. CORRESPONDENCE ADDRESS**☒ Customer Number or Bar Code Labelor ☒ Correspondence address below

(Insert Customer No. or Attach bar code label here)

Name	<b>Rohan Peries</b>				
	<b>Roche Bioscience</b>				
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Attorney	<b>Rohan Peries</b>	Registration No.	<b>35,752</b>
Signature		Date	<b>February 8, 2002</b>

# FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

## Complete If Known

Application Number new application

Filing Date herewith

First Named Inventor **BUSER, t al.**

Examiner Name unassigned

Group / Art Unit unassigned

TOTAL AMOUNT OF PAYMENT (\$ 830.00

Attorney Docket No. **R0134A-REG**

## METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees, to charge any additional fees that may be required, or to credit any overpayment to:

Deposit Account Number

18-1700

Deposit Account Name

Roche Bioscience  
3401 Hillview Avenue  
Palo Alto, CA 94304

- ☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17  
☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☐ Payment Enclosed:

- ☐ Check ☐ Credit card ☐ Money Order ☐ Other

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Fee Code	Entity (\$)	Small Fee Code	Entity (\$)	Fee Description	Fee Paid
101	710	201	355	Utility filing fee	740.00
106	320	206	160	Design filing fee	
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	

SUBTOTAL (1)

740.00

### 2. EXTRA CLAIM FEES

Total Claims	25	-20	=	5	X	18.00	=	90.
Independent Claims	1	-3	=	0	X	84.	=	
Multiple Dependent					X		=	0

Large Fee Code	Entity (\$)	Small Fee Code	Entity (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)

830.00

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Fee Code	Entity (\$)	Small Fee Code	Entity (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet.	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	390	216	195	Extension for reply within second month	
117	890	217	445	Extension for reply within third month	
118	1,390	218	695	Extension for reply within fourth month	
128	1,890	228	945	Extension for reply within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,240	241	620	Petition to revive - unintentional	
142	1,240	242	620	Utility issue fee (or reissue)	
143	440	243	220	Design issue fee	
144	600	244	300	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	130	123	130	Petitions related to provisional applications	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))	
179	710	279	355	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$ 0

## SUBMITTED BY

Name (Print/Type) **Rohan Peries** Registration No. Attorney/Agent **35,752** Telephone **(650) 855-5311**  
 Signature *[Signature]* Date **2-8-02** February 8, 2002